

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

ALAMEDA COUNTY TREASURER
1221 OAK ST

OAKLAND

CA 94612

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,239,233.77

Gross Claim **\$1,239,233.77**

Net Claim / Payment Amount **\$1,239,233.77**

YTD Amount: **\$39,573,685.21**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

ALPINE COUNTY TREASURER
PO BOX 217

MARKLEEVILLE

CA 96120

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 31,592.62

Gross Claim \$31,592.62

Net Claim / Payment Amount \$31,592.62

YTD Amount: \$1,008,878.64

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

AMADOR COUNTY TREASURER
810 COURT ST

JACKSON

CA 95642

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 56,868.38

Gross Claim \$56,868.38

Net Claim / Payment Amount \$56,868.38

YTD Amount: \$1,816,034.67

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

BERKELEY CITY TREASURER
2081 CENTER STREET

BERKELEY CA 94704

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 105,000.12

Gross Claim **\$105,000.12**

Net Claim / Payment Amount **\$105,000.12**

YTD Amount: **\$3,353,073.33**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

BUTTE COUNTY TREASURER
25 COUNTY CENTER DR

OROVILLE

CA 95965

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 202,688.24

Gross Claim **\$202,688.24**

Net Claim / Payment Amount **\$202,688.24**

YTD Amount: **\$6,472,645.29**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

CALAVERAS COUNTY TREASURER
GOVERNMENT CENTER

SAN ANDREAS

CA 95249

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 61,490.77

Gross Claim **\$61,490.77**

Net Claim / Payment Amount **\$61,490.77**

YTD Amount: **\$1,963,646.04**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

COLUSA COUNTY TREASURER

546 JAY ST

COLUSA

CA 95932

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 51,205.13

Gross Claim **\$51,205.13**

Net Claim / Payment Amount **\$51,205.13**

YTD Amount: **\$1,635,184.47**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

CONTRA COSTA COUNTY TREASURER

625 COURT ST RM 102

MARTINEZ

CA 94553

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 787,200.08

Gross Claim \$787,200.08

Net Claim / Payment Amount \$787,200.08

YTD Amount: \$25,138,443.40

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

DEL NORTE COUNTY TREASURER
981 H ST STE 150

CRESCENT CITY CA 95531

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 53,898.21

Gross Claim \$53,898.21

Net Claim / Payment Amount \$53,898.21

YTD Amount: \$1,721,185.10

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

EL DORADO COUNTY TREASURER
360 FAIR LN

PLACERVILLE

CA 95667

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 140,870.49

Gross Claim \$140,870.49

Net Claim / Payment Amount \$140,870.49

YTD Amount: \$4,498,557.49

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

FRESNO COUNTY TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 852,371.79

Gross Claim \$852,371.79

Net Claim / Payment Amount \$852,371.79

YTD Amount: \$27,219,636.53

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

GLENN COUNTY TREASURER
516 WEST SYCAMORE STREET

WILLOWS

CA 95988

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 54,189.51

Gross Claim \$54,189.51

Net Claim / Payment Amount \$54,189.51

YTD Amount: \$1,730,487.56

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

HUMBOLDT COUNTY TREASURER
825 FIFTH ST RM 125

EUREKA

CA 95501

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 125,010.27

Gross Claim **\$125,010.27**

Net Claim / Payment Amount **\$125,010.27**

YTD Amount: **\$3,992,077.39**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

IMPERIAL COUNTY TREASURER
940 WEST MAIN ST

EL CENTRO

CA 92243 2863

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 172,221.69

Gross Claim \$172,221.69

Net Claim / Payment Amount \$172,221.69

YTD Amount: \$5,499,726.51

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

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REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

INYO COUNTY TREASURER
PO BOX 0

INDEPENDENCE

CA 93526

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 36,549.27

Gross Claim **\$36,549.27**

Net Claim / Payment Amount **\$36,549.27**

YTD Amount: **\$1,167,164.06**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

KERN COUNTY TREASURER
PO BOX 981240

SACRAMENTO CA 95798 1240

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 735,632.63

Gross Claim \$735,632.63

Net Claim / Payment Amount \$735,632.63

YTD Amount: \$23,491,688.93

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

KINGS COUNTY TREASURER

PO BOX 1406

SACRAMENTO

CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 144,718.38

Gross Claim \$144,718.38

Net Claim / Payment Amount \$144,718.38

YTD Amount: \$4,621,436.07

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

LAKE COUNTY TREASURER
255 NORTH FORBES ST RM 215

LAKEPORT

CA 95453

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 71,698.48

Gross Claim \$71,698.48

Net Claim / Payment Amount \$71,698.48

YTD Amount: \$2,289,618.85

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

LASSEN COUNTY TREASURER
COUNTY COURTHOUSE RM 103

SUSANVILLE

CA 96130

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 53,983.42

Gross Claim \$53,983.42

Net Claim / Payment Amount \$53,983.42

YTD Amount: \$1,723,906.14

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

LOS ANGELES COUNTY TREASURER
PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 9,894,909.18

Gross Claim \$9,894,909.18

Net Claim / Payment Amount \$9,894,909.18

YTD Amount: \$315,983,981.93

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

MADERA COUNTY TREASURER

C/O BANK OF AMERICA

PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 151,572.13

Gross Claim **\$151,572.13**

Net Claim / Payment Amount **\$151,572.13**

YTD Amount: **\$4,840,303.54**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

MARIN COUNTY TREASURER

PO BOX 4220
CIVIC CENTER
SAN RAFAEL

CA 94913

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 196,363.76

Gross Claim **\$196,363.76**

Net Claim / Payment Amount **\$196,363.76**

YTD Amount: **\$6,270,679.30**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

MARIPOSA COUNTY TREASURER
PO BOX 36

MARIPOSA CA 95338

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 36,829.83

Gross Claim \$36,829.83

Net Claim / Payment Amount \$36,829.83

YTD Amount: \$1,176,123.62

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

MENDOCINO COUNTY TREASURER

501 LOW GAP RD 1060

UKIAH

CA 95482

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 87,228.25

Gross Claim **\$87,228.25**

Net Claim / Payment Amount **\$87,228.25**

YTD Amount: **\$2,785,546.59**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

MERCED COUNTY TREASURER

PO BOX 981311

WEST SACRAMENTO

CA 95798 1311

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 255,033.64

Gross Claim \$255,033.64

Net Claim / Payment Amount \$255,033.64

YTD Amount: \$8,144,243.15

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

MODOC COUNTY TREASURER
204 COURT ST RM 101

ALTURAS

CA 96101

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 34,346.31

Gross Claim **\$34,346.31**

Net Claim / Payment Amount **\$34,346.31**

YTD Amount: **\$1,096,814.98**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

MONO COUNTY TREASURER
PO BOX 495

BRIDGEPORT

CA 93517

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 35,820.84

Gross Claim **\$35,820.84**

Net Claim / Payment Amount **\$35,820.84**

YTD Amount: **\$1,143,902.41**

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

MONTEREY COUNTY TREASURER
PO BOX 1406

SACRAMENTO CA 95812 1406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 406,207.78

Gross Claim \$406,207.78

Net Claim / Payment Amount \$406,207.78

YTD Amount: \$12,971,837.39

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

NAPA COUNTY TREASURER

1195 THIRD ST RM 108

NAPA

CA 94559 3035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 116,696.20

Gross Claim **\$116,696.20**

Net Claim / Payment Amount **\$116,696.20**

YTD Amount: **\$3,726,576.01**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

NEVADA COUNTY TREASURER
PO BOX 128

NEVADA CITY

CA 95959

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 95,513.57

Gross Claim \$95,513.57

Net Claim / Payment Amount \$95,513.57

YTD Amount: \$3,050,129.89

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

ORANGE COUNTY TREASURER

PO BOX 981024

WEST SACRAMENTO

CA 95798 1024

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,815,737.12

Gross Claim \$2,815,737.12

Net Claim / Payment Amount \$2,815,737.12

YTD Amount: \$89,917,735.46

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

PLACER COUNTY TREASURER

2976 Richardson Dr.

Auburn

CA 95603

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 236,508.41

Gross Claim **\$236,508.41**

Net Claim / Payment Amount **\$236,508.41**

YTD Amount: **\$7,552,658.33**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

PLUMAS COUNTY TREASURER
PO BOX 176

QUINCY

CA 95971

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 49,616.65

Gross Claim \$49,616.65

Net Claim / Payment Amount \$49,616.65

YTD Amount: \$1,584,457.92

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

RIVERSIDE COUNTY TREASURER

C/O UNION BANK OF CA ST GOV

PO BOX 4035

SACRAMENTO

CA 95812 4035

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,806,037.82

Gross Claim **\$1,806,037.82**

Net Claim / Payment Amount **\$1,806,037.82**

YTD Amount: **\$57,674,002.91**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SACRAMENTO COUNTY TREASURER
PO BOX 980264

WEST SACRAMENTO CA 95798 0264

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,113,175.36

Gross Claim \$1,113,175.36

Net Claim / Payment Amount \$1,113,175.36

YTD Amount: \$35,548,136.72

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SAN BENITO COUNTY TREASURER

COURTHOUSE
440 FIFTH ST RM 107
HOLLISTER

CA 95023

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 69,243.36

Gross Claim \$69,243.36

Net Claim / Payment Amount \$69,243.36

YTD Amount: \$2,211,217.23

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

SAN BERNARDINO CO TREASURER

PO BOX 1859

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,827,977.28

Gross Claim \$1,827,977.28

Net Claim / Payment Amount \$1,827,977.28

YTD Amount: \$58,374,617.69

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SAN DIEGO COUNTY TREASURER
PO BOX 980304

WEST SACRAMENTO CA 95798 0304

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 2,838,831.40

Gross Claim **\$2,838,831.40**

Net Claim / Payment Amount **\$2,838,831.40**

YTD Amount: **\$90,655,228.20**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

SAN FRANCISCO COUNTY TREASURER

PO BOX 2920

SACRAMENTO

CA 95814 2920

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 643,117.64

Gross Claim \$643,117.64

Net Claim / Payment Amount \$643,117.64

YTD Amount: \$20,537,315.63

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SAN JOAQUIN COUNTY TREASURER
PO BOX 981355

WEST SACRAMENTO CA 95798 1355

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 585,130.12

Gross Claim \$585,130.12

Net Claim / Payment Amount \$585,130.12

YTD Amount: \$18,685,542.32

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

SAN LUIS OBISPO COUNTY TREASURER

PO BOX 1149

SAN LUIS OBISPO

CA 93406

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 236,018.29

Gross Claim \$236,018.29

Net Claim / Payment Amount \$236,018.29

YTD Amount: \$7,537,006.80

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SAN MATEO COUNTY TREASURER

C/O UNION BANK ST GOVT DEPT

PO BOX 4035

Sacramento

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 565,194.78

Gross Claim **\$565,194.78**

Net Claim / Payment Amount **\$565,194.78**

YTD Amount: **\$18,048,927.48**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SANTA BARBARA COUNTY TREASURER
PO BOX 579

SANTA BARBARA CA 93102

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 402,313.48

Gross Claim \$402,313.48

Net Claim / Payment Amount \$402,313.48

YTD Amount: \$12,847,476.61

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SANTA CLARA CO TREASURER
PO BOX 1406

SACRAMENTO

CA 95812

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 1,592,165.09

Gross Claim \$1,592,165.09

Net Claim / Payment Amount \$1,592,165.09

YTD Amount: \$50,844,192.31

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SANTA CRUZ COUNTY TREASURER
PO BOX 1817

SANTA CRUZ CA 95061

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 255,683.79

Gross Claim \$255,683.79

Net Claim / Payment Amount \$255,683.79

YTD Amount: \$8,165,004.96

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SHASTA COUNTY TREASURER
PO BOX 1859

SACRAMENTO

CA 95812 1859

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 168,153.50

Gross Claim \$168,153.50

Net Claim / Payment Amount \$168,153.50

YTD Amount: \$5,369,813.02

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SIERRA COUNTY TREASURER
PO BOX 376

DOWNIEVILLE

CA 95936 0376

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 32,274.98

Gross Claim \$32,274.98

Net Claim / Payment Amount \$32,274.98

YTD Amount: \$1,030,669.16

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

SISKIYOU COUNTY TREASURER

311 FOURTH ST RM 104

YREKA

CA 96097

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 59,991.31

Gross Claim \$59,991.31

Net Claim / Payment Amount \$59,991.31

YTD Amount: \$1,915,762.22

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

SOLANO COUNTY T TC
675 TEXAS ST STE 1900

FAIRFIELD

CA 94533 6337

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 350,604.02

Gross Claim **\$350,604.02**

Net Claim / Payment Amount **\$350,604.02**

YTD Amount: **\$11,196,187.06**

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

SONOMA COUNTY TREASURER

PO BOX 1204

SACRAMENTO

CA 95812 1204

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 393,939.49

Gross Claim \$393,939.49

Net Claim / Payment Amount \$393,939.49

YTD Amount: \$12,580,061.66

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

STANISLAUS COUNTY TREASURER
PO BOX 3052

MODESTO

CA 95353 3052

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 446,505.18

Gross Claim \$446,505.18

Net Claim / Payment Amount \$446,505.18

YTD Amount: \$14,258,694.41

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

SUTTER COUNTY TREASURER

PO BOX 546

YUBA CITY

CA 95992

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 165,588.24

Gross Claim \$165,588.24

Net Claim / Payment Amount \$165,588.24

YTD Amount: \$4,283,766.28

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

TEHAMA COUNTY TREASURER
PO BOX 1150

RED BLUFF

CA 96080

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 69,498.99

Gross Claim \$69,498.99

Net Claim / Payment Amount \$69,498.99

YTD Amount: \$2,219,380.39

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

TRI CITY MENTAL HEALTH
2008 N GAREY AVENUE

POMONA

CA 91767

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 193,102.28

Gross Claim \$193,102.28

Net Claim / Payment Amount \$193,102.28

YTD Amount: \$6,166,527.27

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A

PAYMENT ISSUE DATE: 03/15/2013

TRINITY CO TREASURER

PO BOX 1297

WEAVERVILLE

CA 96093 1297

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 35,685.75

Gross Claim \$35,685.75

Net Claim / Payment Amount \$35,685.75

YTD Amount: \$1,139,588.56

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

TULARE COUNTY TREASURER
COUNTY CIVIC CENTER RM 103E
221 SOUTH MOONEY BL
VISALIA CA 93291

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 422,760.75

Gross Claim \$422,760.75

Net Claim / Payment Amount \$422,760.75

YTD Amount: \$13,500,439.84

For assistance, please call: John Bodolay at (916) 323-2154

CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

TUOLUMNE COUNTY TREASURER
2 SOUTH GREEN ST

SONORA

CA 95370

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 66,415.20

Gross Claim \$66,415.20

Net Claim / Payment Amount \$66,415.20

YTD Amount: \$2,120,902.76

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

VENTURA COUNTY TREASURER

C/O WELLS FARGO BANK

PO BOX 980307

WEST SACRAMENTO

CA 95798 0307

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 **To** 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 721,190.13

Gross Claim **\$721,190.13**

Net Claim / Payment Amount **\$721,190.13**

YTD Amount: **\$23,030,482.20**

For assistance, please call: John Bodolay at (916) 323-2154

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CONTROLLER OF CALIFORNIA, STATE OF CALIFORNIA

P O BOX 942850, SACRAMENTO, CA 94250-0001

REMITTANCE ADVICE

CLAIM SCHEDULE NUMBER: 1200231A
PAYMENT ISSUE DATE: 03/15/2013

YOLO COUNTY TREASURER
PO BOX 1995

WOODLAND

CA 95695

Financial Activity

Additional Description:

Allocation of the Mental Health Services Fund apportionment funds per Welfare and Institutions Code Section 5891(c)

Mental Health Services Fund apportionment per AB1467

Fiscal Year: 2012

Collection Period: 02/01/2013 To 02/28/2013

Payment Calculations:

Mental health Services apportionment amount for current period 188,210.06

Gross Claim \$188,210.06

Net Claim / Payment Amount \$188,210.06

YTD Amount: \$6,010,299.26

For assistance, please call: John Bodolay at (916) 323-2154

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